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APPLICANTS

Hai-Wen Chen, Orlando, FL;
 Felix M. Fontan, Orlando, FL;
 Teresa L. Olson, Winter Garden, FL;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 4	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

BIRCH STEWART KOLASCH & BIRCH, LLP
 PO BOX 747
 FALLS CHURCH, VA22040-0747

TITLE

SYSTEM AND METHOD FOR ESTIMATING NOISE USING MEASUREMENT BASED PARAMETRIC FITTING
 NON-UNIFORMITY CORRECTION

FILING FEE RECEIVED 1548	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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